Chapter you are filing under:	
☐ Chapter 7	
☐ Chapter 11	
☐ Chapter 12	
■ Chapter 13	☐ Ch am
	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself								
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):					
Your full name								
Write the name that is on	David							
picture identification (for	First name		First name					
example, your driver's license or passport).	Raymond Middle name		Middle name					
Bring your picture			whole hame					
identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)					
All other names you have used in the last 8 years								
Include your married or maiden names.								
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0752							
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Bring your picture identification to your meeting with the trustee. Many Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Many Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number About Debtor 1: David First name Raymond Middle name Many Last name and Suffix (Sr., Jr., II, III)					

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 2 of 59

Debtor 1 David Raymond Many Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	14901 White Magnolia Court Orlando, FL 32824 Number, Street, City, State & ZIP Code Orange County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 3 of 59

Debtor 1 David Raymond Many				Case number (if known)			
Par	t 2: Tell the Court About	our Bankruptcy C	ase				
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a	brief description of	each, see <i>Notice Required by</i> ge 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for B e box.	ankruptcy	
		Chapter 13					
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office about how you may pay. Typically, if you are paying the fee yourself, you may pay worder. If your attorney is submitting your payment on your behalf, your attorney may a pre-printed address.				urself, you may pay with cash, cashier's che alf, your attorney may pay with a credit card o	ck, or money or check with		
		The Filing F ☐ I request th	ee in Installments (C	Official Form 103A). ed (You may request this option	on, sign and attach the <i>Application for Individ</i> on only if you are filing for Chapter 7. By law, a our income is less than 150% of the official po	a judge may,	
		applies to ye	our family size and y	ou are unable to pay the fee ir	n installments). If you choose this option, you cial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the last 8 years?	■ No.					
	•	District	ì	When	Case number		
		District		When			
		District	<u> </u>	When	Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business	■ No □ Yes.					
	partner, or by an affiliate?						
		Debtor			Relationship to you		
		District	·	When	Case number, if known		
		Debtor			Relationship to you		
		District	i	When	Case number, if known		
11.	Do you rent your residence?	■ No. Go to	line 12.				
		☐ Yes. Has y	our landlord obtaine	ed an eviction judgment agains	t you and do you want to stay in your resider	ice?	
			No. Go to line 12.				
			Yes. Fill out <i>Initial</i> bankruptcy petitio		Judgment Against You (Form 101A) and file i	t with this	

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 4 of 59

Deb	tor 1 David Raymond N	lany		Case number (if known)
Part	Report About Any Bu	sinesses	You Own as a Sole Proprie	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code
	it to this petition.		Check the appropriate b	ox to describe your business:
	·			iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	s. If you indicate that you are ns, cash-flow statement, and S.C. 1116(1)(B).	e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	Report if You Own or	Have Any	/ Hazardous Property or Ar	ny Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	- •			Number, Street, City, State & Zip Code

Debtor 1 David Raymond Many

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 6 of 59

Deb	otor 1 David Raymond N	l any		Case number (if known)				
Par	t 6: Answer These Quest	ions for Repo	orting Purposes					
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incuindividual primarily for a personal, family, or household purpose."					
			No. Go to line 16b.					
			Yes. Go to line 17.					
				usiness debts? Business debts are de estment or through the operation of the l				
			No. Go to line 16c.					
			Yes. Go to line 17.					
		16c. S	ate the type of debts you	owe that are not consumer debts or busi	iness debts			
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapte	r 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and			Do you estimate that after any exempt p vailable to distribute to unsecured credit	property is excluded and administrative expenses ors?			
	administrative expenses		l No					
	are paid that funds will be available for distribution to unsecured creditors?		l Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?			□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities to be?			□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Par	t 7: Sign Below							
	you	If I have cho United State If no attorne document, I I request rel I understand bankruptcy and 3571. /s/ David F	isen to file under Chapter as Code. I understand the set of the se	relief available under each chapter, and not pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b) chapter of title 11, United States Code, st., concealing property, or obtaining mone to \$250,000, or imprisonment for up to 2 Signature of De	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7. Is not an attorney to help me fill out this . specified in this petition. ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			MM / DD / YYYY		MM / DD / YYYY			

C	Jase 6.17-DK-03317-ABB DOC 1	Filed 05/19/17	Page 7 01 59	
Debtor 1 David Raymond I	Many	Case number (if known)		
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petitic under Chapter 7, 11, 12, or 13 of title 11, United Sta for which the person is eligible. I also certify that I	ates Code, and have e	xplained the relief available under each chapter	
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, cert schedules filed with the petition is incorrect.			
	/s/ Walter F. Benenati	Date	May 19, 2017	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Walter F. Benenati			
	Printed name			
	Walter F. Benenati, Credit Attorney P.A.			
	Firm name			
	2702 E Robinson Street			
	Orlando, FL 32803			
	Number, Street, City, State & ZIP Code	<u> </u>		
	Contact phone (407) 777-7777	Email address	wfb@777lawfirm.com	

46679 Bar number & State

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 8 of 59

		0030 0.11	BR 00017 ABB	D00 1 1 11CG 00/15/11	1 age o or	00	
Fill	in this info	rmation to identify your	case:				
Deb	otor 1	David Raymond I	Many Middle Name	Last Name			
	otor 2						
(Spo	use if, filing)	First Name	Middle Name	Last Name			
Unit	ted States B	ankruptcy Court for the:	MIDDLE DISTRICT OF F	FLORIDA			
	se number					□ Chec	k if this is an
`						_	ided filing
		orm 106Sum	and Liabilities an	d Certain Statistical Inf	formation		12/15
Be a infoi your	s complete rmation. Fill r original fo	and accurate as possible lout all of your schedul rms, you must fill out a	es first; then complete the	are filing together, both are equall e information on this form. If you at the box at the top of this page.	y responsible fo	r supplyi	ng correct
Par	t 1: Sumr	marize Your Assets					
						Your a	assets of what you own
1.		A/B: Property (Official Foundation 55, Total real estate, f				\$	130,000.00
						\$	4,183.35
	1c. Copy li	ne 63, Total of all propert	y on Schedule A/B			\$	134,183.35
Par	t 2: Sumr	marize Your Liabilities					
						Your I	iabilities
							nt you owe
2.			laims Secured by Property mn A, Amount of claim, at t	(Official Form 106D) he bottom of the last page of Part 1 c	of Schedule D	\$	205,958.00
3.			Unsecured Claims (Official 1 (priority unsecured claims	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy 1	the total claims from Part	2 (nonpriority unsecured cla	aims) from line 6j of Schedule E/F		\$	25,842.00
				You	r total liabilities	\$	231,800.00
Par	t 3: Sumr	marize Your Income and	Expenses				
4.		l: Your Income (Official Fo		I		\$	4,761.01
5.	Schedule C Copy your	J: Your Expenses (Official monthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>			\$	3,238.33
Par	t 4: Answ	ver These Questions for	Administrative and Statis	stical Records			
6.	-	•	er Chapters 7, 11, or 13? on this part of the form. Ch	neck this box and submit this form to	the court with you	ır other so	hedules.
7.	■ Yes What kind	l of debt do you have?					
				lebts are those "incurred by an indivice grows are those for statistical purposes. 28 U.S.C. §		a personal	l, family, or
		debts are not primarily ourt with your other sched		e nothing to report on this part of the	form. Check this	box and s	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 9 of 59

Debtor 1 David Raymond Many Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____6,066.99

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	ıim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		Case 6.	17-DK-0331	./-AE	BR DOC	L Filed 05/1	9/17	Page	10 01 59		
Fill in	this inform	nation to identify y	our case and th	is filing	g:						
Debto	or 1	David Raymo	nd Many								
	_	First Name	Middle	Name		Last Name					
Debto (Spous	or 2 e, if filing)	First Name	Middle	Name		Last Name					
Unite	d States Bar	nkruptcy Court for th	ne: MIDDLE DI	STRIC	T OF FLORIDA	A					
Case	number _					-					Check if this is an amended filing
_		rm 106A/B e A/B: Pr o	nnerty								12/15
n each	category, se	eparately list and des	scribe items. List a			n asset fits in more th					ategory where you
nform		space is needed, at				eare filing together, be top of any additiona					
Part 1	: Describe E	Each Residence, Bui	lding, Land, or Otl	her Real	Estate You Ow	n or Have an Interest	In				
. Do y	ou own or h	ave any legal or equi	table interest in a	ny resid	lence, building,	land, or similar prope	erty?				
	lo. Go to Part	2									
_		the property?									
	es. Where is	the property:									
1.1				What	t is the property	? Check all that apply					
_		te Magnolia Cou			Single-family h	ome		Do not ded	uct secured cla	ims o	r exemptions. Put
\$	Street address, if	f available, or other descri	ption		Duplex or mult Condominium	_					ns on <i>Schedule D:</i> cured by Property.
					Manufactured	or mobile home		Current va	due of the	Cur	rent value of the
_	Orlando	FL	32824-0000					entire pro	perty?		tion you own?
(City	State	ZIP Code		Investment pro Timeshare	pperty			60,000.00		\$130,000.00
					Other			(such as fo	ee simple, tena		wnership interest by the entireties, or
				Who		in the property? Chec	k one	a life estat	e), if known. ple		
(Orange								•		
(County				Debtor 1 and D	Debtor 2 only		— Chaol	if this is som	muni	h, proporty
					At least one of	the debtors and anoth	er		k if this is com structions)	munn	ty property
					r information yo	ou wish to add about on number:	this item	, such as lo	cal		
					al Description						
				in P		3, FOREST RIDG Page(s) 91, 92 a					
					• •						
						rom Part 1, includi					\$130,000.00

Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	otor 1 David Raymond Many	Case number (if known)				
3. C	ars, vans, trucks, tractors, sport utility v	ehicles, motorcycles				
г	l No					
	l Yes					
3.1	Make: Chevrolet	Who has an interest in the property? Check one	De west de door ee	and deline an execution. Dut		
	S10 Pickup Extended	_	the amount of any	red claims or exemptions. Put secured claims on Schedule D:		
	Model: Cab LS	■ Debtor 1 only	Creditors Who Hav	re Claims Secured by Property.		
	Year: 2001	Debtor 2 only	Current value of the			
	Approximate mileage: 101,308 Other information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?		
	VIN # 1GCCS19W618101017	At least one of the debtors and another				
	*Needs A/C service and brake	☐ Check if this is community property	\$2,400	.00 \$2,400.00		
	work done	(see instructions)				
5 / ·	xamples: Boats, trailers, motors, personal w No Yes Add the dollar value of the portion you ov	nd other recreational vehicles, other vehicles, ratercraft, fishing vessels, snowmobiles, motorcyc	ele accessories	\$2,400.00		
				Current value of the		
	you own or have any legal or equitable i	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
[lousehold goods and furnishings Examples: Major appliances, furniture, linen ☐ No ■ Yes. Describe	s, china, kitchenware				
	utensils, silver	rs, couch, bedroom set, cookware disherware, refrigerator, stove, washer/dryer 1 White Magnolia Court, Orlando FL 3282		\$300.00		
[Electronics Examples: Televisions and radios; audio, vio including cell phones, cameras, l No ■ Yes. Describe	deo, stereo, and digital equipment; computers, pri media players, games	inters, scanners; music co	ollections; electronic devices		
		ereos, VCR, old computer (broken) 11 White Magnolia Court, Orlando FL 3282	24	\$150.00		
	other collections, memorabilia, co ■ No	, prints, or other artwork; books, pictures, or other ollectibles	r art objects; stamp, coin,	or baseball card collections;		
L	Yes. Describe					
	Equipment for sports and hobbies Examples: Sports, photographic, exercise, a musical instruments No Yes. Describe	and other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes a	nd kayaks; carpentry tools;		

Official Form 106A/B Schedule A/B: Property page 2

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 12 of 59

De	ebtor 1	David Raymo	ond Many	Case	number (if known)	
10.	Firearn Examp ■ No		s, shotguns, ammunition, and i	related equipment		
	☐ Yes.	Describe				
11.	□ No		othes, furs, leather coats, design	gner wear, shoes, accessories		
			Personal clothing Location: 14901 White I	Magnolia Court, Orlando FL 32824		\$50.00
12.	■ No		welry, costume jewelry, engag	ement rings, wedding rings, heirloom jewelry	, watches, gems, go	old, silver
13.	Examp ☐ No	rm animals oles: Dogs, cats, I	birds, horses			
	Yes.	Describe				
			Dog Location: 14901 White I	Magnolia Court, Orlando FL 32824		\$2.50
15	■ No □ Yes. i. Add to	Give specific info the dollar value of art 3. Write that i	ormation of all of your entries from Panumber here	ot already list, including any health aids y ort 3, including any entries for pages you h	Γ	\$502.50
		scribe Your Finand vn or have anv le	cial Assets egal or equitable interest in a	any of the following?		Current value of the
	,	,		, , , , , , , , , , , , , , , , , , ,		portion you own? Do not deduct secured claims or exemptions.
16.	■ No	,,	nave in your wallet, in your hor	ne, in a safe deposit box, and on hand when	you file your petitio	n
	•			unts; certificates of deposit; shares in credit unwith the same institution, list each.	ınions, brokerage h	ouses, and other similar
	Yes			Institution name:		
			17.1. Checking	Wells Fargo - 7646		\$10.00
18.			or publicly traded stocks			
	Examp ■ No	oles: Bond funds,	investment accounts with brol	kerage firms, money market accounts		

☐ Yes...... Institution or issuer name:

Official Form 106A/B Schedule A/B: Property page 3

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 13 of 59

D	ebtor 1	David Raymon	d Many		Case number (if known)	
19	joint v	•	k and interests in inco	rporated and unincorporated businesses	s, including an interest in an Ll	LC, partnership, and
	■ No					
	☐ Yes.	Give specific inform	nation about them Name of entity:		% of ownership:	
20	Negoti	able instruments ind	clude personal checks, o	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and mo transfer to someone by signing or delivering	ney orders.	
	■ No					
	☐ Yes.	Give specific inform	nation about them Issuer name:			
21		nent or pension acoles: Interests in IRA		, 403(b), thrift savings accounts, or other pe	ension or profit-sharing plans	
	■ Yes.	List each account s	eparately. Type of account:	Institution name:		
			Roth IRA	Action Nissan		\$1,270.85
22	Your s		leposits you have made	so that you may continue service or use front, public utilities (electric, gas, water), telectric,		hers
	■ No □ Yes.			Institution name or individual:		
23	. Annuiti	ies (A contract for a	periodic payment of mo	oney to you, either for life or for a number of	years)	
	☐ Yes	Issue	er name and description			
24	. Interest	s in an education	IRA, in an account in a 9A(b), and 529(b)(1).	ı qualified ABLE program, or under a qua	lified state tuition program.	
	■ No □ Yes	Instit	ution name and descrip	tion. Separately file the records of any interest	ests.11 U.S.C. § 521(c):	
25	. Trusts, ■ No	equitable or futur	e interests in property	(other than anything listed in line 1), and	l rights or powers exercisable	for your benefit
	☐ Yes.	Give specific inform	nation about them			
26	Examp			and other intellectual property eeds from royalties and licensing agreemer	nts	
	■ No □ Yes.	Give specific inform	nation about them			
27	Examp		d other general intangi s, exclusive licenses, co	bles properative association holdings, liquor licens	ses, professional licenses	
	■ No □ Yes.	Give specific inform	nation about them			
M	oney or	property owed to y	you?		por Do	rent value of the tion you own? not deduct secured ms or exemptions.
28		unds owed to you				
	■ No □ Yes.	Give specific inform	nation about them, includ	ding whether you already filed the returns ar	nd the tax years	
29	. Family			Laurand ability		
	■ No		, , , , , , , , , , , , , , , , , , , ,	ll support, child support, maintenance, divor	ce settlement, property settleme	nt
Of		Give specific inform n 106A/B	nation	Schedule A/B: Property		page 4

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 14 of 59

Deb	tor 1	David Raymond Man	y	Case number (if known)	
_	Examp			ity benefits, sick pay, vacation pay, workers' compe	nsation, Social Security
	■ No □ Yes.	Give specific information			
31. I	nteres	ts in insurance policies	e insurance: health savings acc	count (HSA); credit, homeowner's, or renter's insurar	nce
	■ No	noo. Hoalin, aloability, or inc	, modranos, nodiai od vingo doc	sount (11671), Groun, Hornostmore, Gritoriter e incurar	
	Yes.		any of each policy and list its va pany name:	alue. Beneficiary:	Surrender or refund
					value:
_	If you a		lue you from someone who h g trust, expect proceeds from a	nas died a life insurance policy, or are currently entitled to rece	eive property because
	Yes.	Give specific information			
	Examp I No	oles: Accidents, employmen	ether or not you have filed a latter or not you have filed a latter of the disputes, insurance claims, or	lawsuit or made a demand for payment r rights to sue	
L	J Yes.	Describe each claim			
	No		ed claims of every nature, ind	cluding counterclaims of the debtor and rights to	set off claims
	Yes.	Describe each claim			
_		ancial assets you did not	already list		
	No Yes.	Give specific information			
36.				ding any entries for pages you have attached	\$1,280.85
Part	5: Des	scribe Any Business-Related	Property You Own or Have an In	terest In. List any real estate in Part 1.	
37. D	o you o	own or have any legal or equi	table interest in any business-re	lated property?	
		to Part 6.			
Ц	Yes. G	so to line 38.			
Part		scribe Any Farm- and Comme ou own or have an interest in fa	ercial Fishing-Related Property Y rmland, list it in Part 1.	ou Own or Have an Interest In.	
46. I	_ `		equitable interest in any farr	m- or commercial fishing-related property?	
	_	Go to Part 7. . Go to line 47.			
	□ res.	Go to line 47.			
Part	7:	Describe All Property You	Own or Have an Interest in That \	You Did Not List Above	
		have other property of an oles: Season tickets, country	ny kind you did not already li y club membership	st?	
_	No				
L	⊥ Yes.	Give specific information			
54.	Add t	he dollar value of all of yo	our entries from Part 7. Write	that number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 15 of 59

Debtor 1	David Raymond Many			Case number (if known)	
Part 8:	List the Totals of Each Part of this Form				
55. Part	1: Total real estate, line 2				\$130,000.00
56. Part	2: Total vehicles, line 5		\$2,400.00		
57. Part	3: Total personal and household items, line 15		\$502.50		
58. Part	4: Total financial assets, line 36		\$1,280.85		
59. Part	5: Total business-related property, line 45		\$0.00		
60. Part	6: Total farm- and fishing-related property, line 52		\$0.00		
61. Part	7: Total other property not listed, line 54	+	\$0.00		
62. Tota	I personal property. Add lines 56 through 61		\$4,183.35	Copy personal property total	\$4,183.35
63. Tota	I of all property on Schedule A/B. Add line 55 + line 62				\$134,183.35

Official Form 106A/B Schedule A/B: Property page 6

Ħ	ll in this inform	ation to identify your case	:				
	ebtor 1	David Raymond Many					
		First Name	Middle Name	L	Last Name		
	ebtor 2 oouse if, filing)	First Name	Middle Name	l	Last Name		
Ur	nited States Bar	kruptcy Court for the: MI	DDLE DISTRICT OF FLO	RIDA			
Ca	ase number						
	known)						Check if this is an amended filing
O	fficial For	m 106C					
		C: The Prop	ertv You Cla	aim	as Exempt		4/16
		<u> </u>			•		
the nee	property you lis	sted on <i>Schedule A/B: Prope</i> I attach to this page as many	erty (Official Form 106A/B)	as yo	ther, both are equally responsible for our source, list the property that you age as necessary. On the top of any	claim as ex	cempt. If more space is
spe any fun exe	ecific dollar am y applicable sta ids—may be ui emption to a pa	ount as exempt. Alternativatutory limit. Some exempt nlimited in dollar amount. I	rely, you may claim the fi ions—such as those for lowever, if you claim ar	full fa r heal n exer	ount of the exemption you claim. iir market value of the property be Ith aids, rights to receive certain I mption of 100% of fair market valu determined to exceed that amoun	eing exempt benefits, an ue under a l	ted up to the amount of d tax-exempt retirement aw that limits the
		y the Property You Claim a	s Exempt				
		exemptions are you claimi	•	n if v	our spouse is filing with you		
••	_	iming state and federal nonl	-	•	,		
	_	iming federal exemptions.	. , .	11 0.	0.0. 8 322(0)(3)		
2				omnt	fill in the information below		
۷.		on of the property and line on	Current value of the	• •	fill in the information below.	Specific Is	aws that allow exemption
		hat lists this property	portion you own	AIII	lount of the exemption you claim	эреспіс іа	ws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
		e Magnolia Court Orland Trange County	lo, \$130,000.00		\$27,021.00		nst. art. X, § 4(a)(1); t. Ann. §§ 222.01 &
	Legal Descr Lot 39, Bloo according to recorded in	ription: lk 173, FOREST RIDGE, o the plat thereof, Plat Book 26, Page(s) 9 of the Public Records of unty, Florida			100% of fair market value, up to any applicable statutory limit	222.02	Allii. 33 222.01 G
	2001 Chevro Cab LS 101	olet S10 Pickup Extende	\$2,400.00		\$1,000.00	Fla. Stat	t. Ann. § 222.25(1)
	VIN # 1GCC *Needs A/C done	S19W618101017 service and brake work edule A/B: 3.1	(100% of fair market value, up to any applicable statutory limit		
		hairs, couch, bedroom	\$300.00		\$300.00	Fla. Con	nst. art. X, § 4(a)(2)
	silverware, washer/drye Location: 14	re dishes and utensils, refrigerator, stove, er 4901 White Magnolia ndo FL 32824			100% of fair market value, up to any applicable statutory limit		

Official Form 106C

Line from Schedule A/B: 6.1

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 17 of 59

ebtor 1 Da	avid Raymond Many			Case number (if known)		
	cription of the property and line on A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	, (2) stereos, VCR, old er (broken)	\$150.00		\$150.00	Fla. Const. art. X, § 4(a)(2)	
Locatio Court, 0	n: 14901 White Magnolia Orlando FL 32824 n Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
	al clothing n: 14901 White Magnolia	\$50.00		\$50.00	Fla. Const. art. X, § 4(a)(2)	
Court, C	Orlando FL 32824 a Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
Dog	n: 14901 White Magnolia	\$2.50		\$2.50	Fla. Const. art. X, § 4(a)(2)	
Court, C	Orlando FL 32824 a Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit		
	ng: Wells Fargo - 7646	\$10.00		\$7.50	Fla. Stat. Ann. § 222.11(2)(c)	
Line non	i Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit		
	ng: Wells Fargo - 7646	\$10.00		\$2.50	Fla. Const. art. X, § 4(a)(2)	
Line non	Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit		
	A: Action Nissan	\$1,270.85		\$1,270.85	Fla. Stat. Ann. § 222.21(2)	
LINE HOII	Tochedule A/B. ZTT			100% of fair market value, up to any applicable statutory limit		
	claiming a homestead exemption					
•	to adjustment on 4/01/19 and every	/ 3 years after that for ca	ases fi	led on or after the date of adjustme	nt.)	
■ No					•	
		ered by the exemption w	ithin 1	,215 days before you filed this case	?	
	No					
	Yes					

	0030 0.1	TER COCIT TIES	00/10/17 1 ag	_			
Fill in this informat	ion to identify you	ır case:					
Debtor 1	David Raymond	l Manv					
_	First Name	Middle Name Last Name					
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name					
United States Bankr	uptcy Court for the	MIDDLE DISTRICT OF FLORIDA					
Case number							
(if known)				_	if this is an		
				amend	led filing		
Official Form	<u>106D</u>						
Schedule D	: Creditors	Who Have Claims Secure	d by Property	/	12/15		
		If two married people are filing together, both are elout, number the entries, and attach it to this form. C					
1. Do any creditors ha	ve claims secured by	y your property?					
☐ No. Check th	is box and submit t	his form to the court with your other schedules. Y	ou have nothing else to	report on this form.			
Yes. Fill in all	of the information	below.					
Part 1: List All S	ecured Claims						
		more than one secured claim, list the creditor separately		Column B	Column C		
much as possible, list t	he claims in alphabeti	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any		
2.1 Wells Fargo Mortgage	Home	Describe the property that secures the claim:	\$205,958.00	\$260,000.00	\$0.00		
8480 Stagec Frederick, M	ID 21701	14901 White Magnolia Court Orlando, FL 32824 Orange County Legal Description: Lot 39, Block 173, FOREST RIDGE, according to the plat thereof, recorded in Plat Book 26, Page(s) 91, 92 and 93, of the Public Records of Orange County, Florid As of the date you file, the claim is: Check all that apply. Contingent Unliquidated					
Who owes the debt?	Chack one	☐ Disputed Nature of lien. Check all that apply.					
■ Debtor 1 only	- OHOOK OHE.	☐ An agreement you made (such as mortgage or se	cured				
Debtor 2 only		car loan)					
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
☐ At least one of the o	•	☐ Judgment lien from a lawsuit					
☐ Check if this claim community debt	relates to a	Other (including a right to offset) Mortgage					
Date debt was incurre	Opened 10/07 Last Active 4/27/17	Last 4 digits of account number 7304					
Add the dollar value	e of your entries in C	olumn A on this page. Write that number here:	\$205,95	8.00			
	ge of your form, add	the dollar value totals from all pages.	\$205,95				

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Case 6.17-	DK-03317-	ABB DO	CI Filed	05/19/17	Page 19 01 59	
Fill in	this inform	ation to identify your o	case:					
Debtor	r 1	David Raymond N	Many Middle Na	me	Last Name			
Debtor (Spouse		First Name	Middle Na	me	Last Name			
United	States Ban	kruptcy Court for the:	MIDDLE DIS	TRICT OF FLOI	RIDA			
Case r	number						_	theck if this is an mended filing
	ial Form		lha Hayra l	l le coource	d Claima			40/45
Sche	edule E/	F: Creditors W	ho Have	Unsecure	d Claims			12/15
Schedu Schedu left. Atta name ar	le G: Executorile D: Creditor ach the Continud case numl	ory Contracts and Unexp rs Who Have Claims Sec nuation Page to this pag ber (if known).	ired Leases (Off ured by Property je. If you have no	icial Form 106G). y. If more space i o information to r	. Do not include is needed, copy	any creditors with	edule A/B: Property (Officiently appropriate of the partially secured claims and the entert on the top of any addited. The control of the top of any addited.	that are listed in tries in the boxes on the
Part 1		of Your PRIORITY Un						
_	•	s have priority unsecure	d claims agains	t you?				
	No. Go to Pa	rt 2.						
	Yes.							
Part 2	List All	of Your NONPRIORIT	Y Unsecured	Claims				
3. Do	any creditor	s have nonpriority unsec	cured claims aga	ainst you?				
	No. You have	e nothing to report in this pa	art. Submit this fo	orm to the court wit	th your other sche	edules.		
•	Yes.							
uns tha	secured claim	, list the creditor separately	y for each claim. I	For each claim liste	ed, identify what t	type of claim it is. D	n. If a creditor has more tha Do not list claims already inc unsecured claims fill out the	luded in Part 1. If more
								Total claim
4.1	Afni			Last 4 digits of a	ccount number	2106		\$904.00
		Creditor's Name			1.41	0	_	
	PO Box 3	34 <i>21</i> gton, IL 61702	,	When was the de	ept incurred?	Opened 07/	10	-
		eet City State Zlp Code		As of the date yo	u file, the claim	is: Check all that a	pply	
	Who incurr	ed the debt? Check one.						
	Debtor 1	only		☐ Contingent				
	Debtor 2	? only		☐ Unliquidated				
	Debtor 1	and Debtor 2 only		☐ Disputed				
	☐ At least	one of the debtors and and	Julei	Type of NONPRIC	ORITY unsecure	d claim:		
		f this claim is for a comr	nunity	Student loans				
	debt	subject to effect?				aration agreement	or divorce that you did not	
		subject to offset?		report as priority cl		ng plans, and other	similar dobts	
	■ No							
	☐ Yes			Other. Specify	Collection	Attorney Dish	Network	

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 20 of 59

Debt	or 1 David Raymond Many		Case number (if know)	
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	6018	\$2,139.00
	Attn: Bankruptcy PO Box 30253	When was the debt incurred?	Opened 11/03 Last Active 12/19/15	
	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacktriangle At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card		
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9669	\$1,644.00
	Attn: Bankruptcy PO Box 30253 Salt Lake City, UT 84130	When was the debt incurred?	Opened 04/05 Last Active 12/06/15	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset? —	report as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u>1</u>	
4.4	Cardworks/CW Nexus	Last 4 digits of account number	6237	\$1,287.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 9201 Old Bethpage, NY 11804	When was the debt incurred?	Opened 07/13 Last Active 11/25/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	d - Merrick Bank	
		· · · · · · · · · · · · · · · · · · ·		

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 21 of 59

Debtor	1 David Raymond Many	Case number (if know)					
4.5	Citicards Cbna Nonpriority Creditor's Name	Last 4 digits of account number	4002	\$1,679.00			
	Attn: Centralized Bankruptcy PO Box 790040 Saint Louis, MO 63179	When was the debt incurred?	Opened 02/07 Last Active 6/29/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed					
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.6	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	6975	\$3,521.00			
	PO Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 08/07 Last Active 6/28/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.7	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	6829	\$2,613.00			
	Kohls Credit PO Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 03/06 Last Active 8/28/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	,				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Charge Acc	count				

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 22 of 59

Debtor 1 David Raymond Many		C				
4.8	LVNV Funding Nonpriority Creditor's Name	Last 4 digits of account number	8063	\$1,110.00		
	PO Box 10497	When was the debt incurred?	Opened 03/16			
	Greenville, SC 29603 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured c	laim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separat report as priority claims	ion agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing p	plans, and other similar debts			
	☐ Yes	■ Other. Specify Bank N.A.	mpany Account Credit One			
4.9	Portfolio Recovery	Last 4 digits of account number	1285	\$3,955.00		
	Nonpriority Creditor's Name PO Box 41067 Norfolk, VA 23541	When was the debt incurred?	Opened 09/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured c	laim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separat report as priority claims	ion agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing p	plans, and other similar debts			
	Yes	Other. Specify Factoring Co	mpany Account Citibank N.A.			
4.1	Portfolio Recovery	Last 4 digits of account number	9847	\$2,440.00		
	Nonpriority Creditor's Name PO Box 41067 Norfolk, VA 23541	When was the debt incurred?	Opened 11/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured c	laim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		ion agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing p	plane, and other similar dobts			
	■ No	Factoring Co	mpany Account Synchrony			
	Yes	Other. Specify Bank				

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 23 of 59

Debtor 1	David Ray	ymond Many		Case nu	umber (if kn	now)	
1	SST/CIGPFI		Last 4 digits of account number	8493			\$2,275.00
4	Nonpriority Cred		When was the debt incurred?	Open-		Last Active	
<u></u>	Number Street (City State Zlp Code	As of the date you file, the claim	is: Check	all that appl	ly	
_	_		Пол				
_	Debtor 1 onl	•	☐ Contingent				
_	Debtor 2 onl	y d Debtor 2 only	☐ Unliquidated☐ Disputed				
_	_	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
_	_	or the deptors and another s claim is for a community	☐ Student loans				
d	lebt	·	☐ Obligations arising out of a sep	aration agr	eement or o	divorce that you did not	
_	_	bject to offset?	report as priority claims				
No			Debts to pension or profit-shari		ind other sir	milar debts	
[☐ Yes		Other. Specify Credit Car	d			
4 1		bus Bank & Trust	Last 4 digits of account number	3860			\$2,275.00
<i>A</i>	Nonpriority Cred Attn: Bankr PO Box 399 St Joseph, I	uptcy Dept 7	When was the debt incurred?	Open 7/17/1		Last Active	
N	Number Street (City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check	all that appl	ly	
	Debtor 1 onl	у	☐ Contingent				
	Debtor 2 onl	у	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
[☐ Check if thi	s claim is for a community	☐ Student loans				
	lebt	11	☐ Obligations arising out of a sep	aration agr	eement or o	divorce that you did not	
_	_	bject to offset?	report as priority claims				
	■ No		Debts to pension or profit-shari		ina otner sir	niiar debts	
L	☐ Yes		Other. Specify Credit Car	d			
Part 3:	List Others	s to Be Notified About a Debt T	hat You Already Listed				
is trying have mo	to collect fro ore than one c	rou have others to be notified abou m you for a debt you owe to some creditor for any of the debts that yo in Parts 1 or 2, do not fill out or su	one else, list the original creditor i u listed in Parts 1 or 2, list the add	n Parts 1 c	or 2, then li	st the collection agency	here. Similarly, if you
Part 4:	Add the Ar	mounts for Each Type of Unsec	cured Claim				
	e amounts of unsecured cla	certain types of unsecured claims. im.	This information is for statistical	reporting p	purposes o	only. 28 U.S.C. §159. Add	d the amounts for each
						Total Claim	
	6a. otal	Domestic support obligations		6a.	\$	0.00	-
claii from Par		Taxes and certain other debts yo	u owe the government	6b.	\$	0.00	
	6c.	Claims for death or personal inju	<u> </u>	6c.	\$	0.00	-
	6d.	Other. Add all other priority unsecu	red claims. Write that amount here.	6d.	\$	0.00	- -
	6e.	Total Priority. Add lines 6a through	n 6d.	6e.	\$	0.00	-
						Total Claim	
	6f.	Student loans		6f.	\$	0.00	-
claii from Par		Obligations arising out of a separate	ration agreement or divorce that	6g.	\$	0.00	

Official Form 106 E/F

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 24 of 59

Debtor 1 David Raymond Many

d Many Case number (if know)

- you did not report as priority claims
 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here
- 6j. Total Nonpriority. Add lines 6f through 6i.

0.00	\$ 6h.
25,842.00	\$ 6i.
25,842.00	\$ 6j.

Fill in this infor	mation to identify your	case:		
Debtor 1	David Raymond I	Many		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Oode	
	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.4	Oity		Olate	Zii Code	
	Name				_
	Number	Street			_
			21.1	710.0	_
2.5	City		State	ZIP Code	
2.0	Name				_
	Number	Street			
	MUHDEL	Sileei			
	City		State	ZIP Code	

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 26 of 59

Fill in this	s information to identify	your case:			
Debtor 1	David Raymo	ond Many			
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fill	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for	the: MIDDLE DISTRICT OF	FLORIDA		
Case num	nber				
(if known)					☐ Check if this is an amended filing
Officia	l Form 106H				
	dule H: Your C	odebtors			12/15
					.2.10
your name	e and case number (if kn	n the boxes on the left. Attack own). Answer every question (If you are filing a joint case,			o of any Additional Pages, write
_		()			
■ No					
☐ Ye	S				
		e you lived in a community pr siana, Nevada, New Mexico, Pu			states and territories include
Alizoi	ia, Camornia, Idano, Louis	siana, mevada, mew illexico, i d	erio Nico, Texas, Wasi	inigion, and wisconsin.	
	. Go to line 3.				
∐ Ye:	s. Did your spouse, former	r spouse, or legal equivalent live	e with you at the time?		
in line	e 2 again as a codebtor o	only if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	column 2.	inicial Form 100E/F), or Sched	ule G (Official Form 1)	oog). Ose Schedule D,	Scriedule E/F, or Scriedule G to IIII
	Column 1: Your codebto Name, Number, Street, City, State			Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	۵
[3.1]	Name			☐ Schedule E/F, li	
				☐ Schedule G, line	
-	Number Street			<u> </u>	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
<u> </u>	Name			□ Schedule E/F, li	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

Fill in this informat	ion to identify your case:	
Debtor 1	David Raymond Many	
Debtor 2 (Spouse, if filing)		
United States Ban	kruptcy Court for the: MIDDLE DISTRICT OF FLORIDA	
Case number		Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	<u>rm 106l</u>	MM / DD/ YYYY
Schedule	I: Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. If you have more than one job, Employed Employed **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Auto Body Mechanic** Housekeeping Include part-time, seasonal, or **Employer's name Disney Worldwide Services Action Nissan Inc** self-employed work. **Employer's address** Occupation may include student 12801 S Orange Blossom Trail 1600 Seven Seas Drive or homemaker, if it applies. Orlando, FL 32837 Lake Buena Vista, FL 32830 How long employed there? October 2015 - Present October 2015 - Present

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

2. \$ 5,467.58 \$ 1,409.85
3. +\$ 0.00 +\$ 0.00
4. \$ 5,467.58 \$ 1,409.85

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

						_	
				Fo	r Debtor 1		or Debtor 2 or on-filing spouse
(Сору	/ line 4 here	4.	\$	5,467.58	\$	1,409.85
_				_		_	· · · · · · · · · · · · · · · · · · ·
L	List a	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	1,002.00	\$_	63.40
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$_	0.00
	5c.	Voluntary contributions for retirement plans	5c.	\$_	247.56	\$_	0.00
	5d. -	Required repayments of retirement fund loans	5d.	\$_	0.00	\$_	0.00
	5e.	Insurance	5e.	\$ \$	0.00	\$_	559.00
	5f.	Domestic support obligations	5f.	ф_	0.00	\$_	0.00
	5g.	Union dues	5g.	φ_	0.00	\$ ₋	35.53
•	5h.	Other deductions. Specify: Dental	5h.+	\$ \$		+ \$ - \$	41.17
		Vision	_	Φ_	0.00	φ_ \$	42.25
		Uniforms	_	φ_ \$	64.35	φ_ \$	0.00
			_	φ_ \$	16.25 21.67	\$ \$	0.00
		Demo Insurance United way	_	φ \$	0.00	φ \$	0.00 2.17
		ADD	_	Ψ_ \$	0.00	- \$	0.87
		DepLife	_	\$	0.00	\$	9.62
		LTD	_	\$	0.00	\$-	7.89
		Supp STD	_	\$	0.00	\$	2.69
	۸ ما ما ا	• •		\$		\$	
		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	· -	1,351.83	· -	764.59
(Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	4,115.75	\$_	645.26
	8b. 8c.	monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		\$_ \$_	0.00	\$_ \$_	0.00
_		settlement, and property settlement.	8c.	\$_	0.00	\$_	0.00
	8d.	Unemployment compensation	8d.	\$_	0.00	\$_	0.00
	8e. 8f.	Social Security	8e.	\$_	0.00	\$_	0.00
	01.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00
8				\$-	0.00	\$	0.00
	8a.	· · ·	8a.	~		· ·	0.00
8	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g. 8h.+	\$	0.00		
8	8h.	Pension or retirement income	_	\$	0.00	\$	0.00
8	8h.	Pension or retirement income Other monthly income. Specify:	8h.+			\$_	
8	8h. Add a	Pension or retirement income Other monthly income. Specify: all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	8h.+			\$_	
88	8h. Add a	Pension or retirement income Other monthly income. Specify: all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	8h.+ 9.		0.00	\$_	0.00
8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	Add : Calcu Add t State Includother	Pension or retirement income Other monthly income. Specify: all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. a all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	8h.+ 9. 10. \$ J. dependent	\$	0.00 4,115.75 + \$_s, your roommates	\$_ s, and	0.00 645.26 = \$4,761
	Add a Calcu Add t State Include other Do no Spec	Pension or retirement income Other monthly income. Specify: all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. a all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	8h.+ 9. 10. \$ J. dependent availabe wilt is the	\$dents	o.00 4,115.75 + \$_ s, your roommates pay expenses list mbined monthly in	\$_and	0.00 645.26 = \$ 4,761 Schedule J. 11. +\$ 0

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 29 of 59

Debtor 1	David Raymond	Many	Case number (if known)	
13. Do	you expect an incr	ease or decrease within the year after you file this form?		
	Yes. Explain:			

Official Form 106I Schedule I: Your Income page 3

Fill in this inform	nation to identify ye	our case.					
Debtor 1	David Raym		v		Che	ck if this is:	
5			•			An amended filing	
Debtor 2 (Spouse, if filing)							wing postpetition chapte the following date:
United States Ba	nkruptcy Court for the	: MIDDL	E DISTRICT OF FLORIDA			MM / DD / YYYY	
Case number							
Official F	orm 106J						
Schedul	e J: Your	Expe	nses				12
Part 1: Des 1. Is this a ju No. Go	own). Answer eve scribe Your House pint case?	ry questic		form. On the top of	any additi	onal pages, write y	your name and case
	No		ial Form 106J-2, <i>Expenses</i>	for Separate House	<i>hold</i> of Deb	otor 2.	
	ave dependents?	■ No	, ,,				
•	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
Do not sta	te the						□ No
dependen	ts names.						☐ Yes
							□ No
				-			□ Yes □ No
							☐ Yes
							□ No
							☐ Yes
expenses	expenses include s of people other t and your depende	han _	No Yes				
Estimate your expenses as o applicable dat	of a date after the e.	our bankr bankrupto	uptcy filing date unless y cy is filed. If this is a supp	elemental Schedule			
	ıch assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your exp	enses
	I or home owners and any rent for th		nses for your residence. In or lot.	nclude first mortgage	4. \$	\$	0.00
If not incl	uded in line 4:						
4a. Rea	al estate taxes				4a. S	·	0.00
	perty, homeowner'				4b. \$		0.00
	ne maintenance, re				4c.		300.00
	neowner's associa			and a manufacture to one	4d. 5	·	15.00
). Additiona	u mortaade bavm	ents for V	our residence , such as ho	me equity loans	5 3	ת	0.00

tilities:		
a. Electricity, heat, natural gas	6a. \$	260.00
b. Water, sewer, garbage collection	6b. \$	60.00
c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	360.00
d. Other. Specify:	6d. \$	0.00
ood and housekeeping supplies	7. \$	800.00
hildcare and children's education costs	8. \$	0.00
lothing, laundry, and dry cleaning	9. \$	120.00
ersonal care products and services	10. \$	
ledical and dental expenses	11. \$	100.00
ransportation. Include gas, maintenance, bus or train fare.	П. Ф	130.00
o not include car payments.	12. \$	250.00
ntertainment, clubs, recreation, newspapers, magazines, and books	13. \$	75.00
haritable contributions and religious donations	14. \$	25.00
nsurance.		
o not include insurance deducted from your pay or included in lines 4 or 20.		
5a. Life insurance	15a. \$	0.00
5b. Health insurance	15b. \$	0.00
5c. Vehicle insurance	15c. \$	345.00
5d. Other insurance. Specify:	15d. \$	0.00
axes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
pecify:	16. \$	0.00
estallment or lease payments:	4 7 - 0	050.00
7a. Car payments for Vehicle 1	17a. \$	358.33
7b. Car payments for Vehicle 2	17b. \$	0.00
7c. Other. Specify:	17c. \$	0.00
7d. Other. Specify:	17d. \$	0.00
our payments of alimony, maintenance, and support that you did not report educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106		0.00
ther payments you make to support others who do not live with you.	\$	0.00
pecify:	19.	0.00
ther real property expenses not included in lines 4 or 5 of this form or on So		
Oa. Mortgages on other property	20a. \$	0.00
0b. Real estate taxes	20b. \$	0.00
Oc. Property, homeowner's, or renter's insurance	20c. \$	0.00
0d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
De. Homeowner's association or condominium dues	20e. \$	0.00
ther: Specify: Pet expenses	21. +\$	40.00
· · ·		10.00
alculate your monthly expenses		
2a. Add lines 4 through 21.	\$	3,238.33
2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-		
2c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,238.33
alculate your monthly net income.		
3a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,761.01
3b. Copy your monthly expenses from line 22c above.	23b\$	3,238.33
		0,200.00
3c. Subtract your monthly expenses from your monthly income.		4 500 00
The result is your monthly net income.	23c. \$	1,522.68
and the second s	a very file this former	
o you expect an increase or decrease in your expenses within the year after or example, do you expect to finish paying for your car loan within the year or do you expect to		ase or decrease because c
odification to the terms of your mortgage?	your mongage payment to increa	ase of decrease because (
No.		
1 Voc. Evolain here:		

Fill in this informa	ntion to identify your	case:					
Debtor 1	David Raymond M	/lany					
	First Name	Middle Name	Last	Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last	Name			
United States Bank	cruptcy Court for the:	MIDDLE DISTRICT OF	F FLORIDA				
Case number (if known)						☐ Check if this is amended filing	
Official Form Declaration		n Individua	l Debto	or's Sched	ules		12/15
	J.Ś.C. §§ 152, 1341, 1				, , ,	00, or imprisonment for u	•
Did you pay o	or agree to pay some	one who is NOT an atto	orney to help	you fill out bankrupt	tcy forms?		
■ No							
☐ Yes. Na	me of person					nkruptcy Petition Preparer's n, and Signature (Official Fo	
	of perjury, I declare rue and correct.	that I have read the sur	mmary and sc	hedules filed with t	his declarati	on and	
X /s/ David	Raymond Many		Х				
David Ra	aymond Many of Debtor 1			Signature of Debtor 2	2		
Date Ma	ay 19, 2017			Date			

Official Form 106Dec

					_	
Fi	II in this information	on to identify you	case:			
De		David Raymond				
De	ebtor 2	First Name	Middle Name	Last Name		
		irst Name	Middle Name	Last Name		
Ur	nited States Bankru	iptcy Court for the:	MIDDLE DISTRICT OF FI	LORIDA		
1 -	ase number				-	Check if this is an amended filing
St		Financial	Affairs for Indivio		Bankruptcy equally responsible for sup	4/10
	ormation. If more mber (if known). <i>A</i>			this form. On the top of an	y additional pages, write yo	ur name and case
Pa	Give Deta	ils About Your Ma	rital Status and Where You	Lived Before		
1.	What is your cu	rrent marital statu	s?			
	■ Married □ Not married					
2.	During the last	3 years, have you	lived anywhere other than v	where you live now?		
	□ No					
	_	of the places you I	ved in the last 3 years. Do no	ot include where you live nov	v.	
	Debtor 1 Prior	Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
	3905 Brentwo Virginia Beac		From-To: 03/2015 - 09/2 0	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	No Yes. Make s	nclude Arizona, Ca	ifornia, Idaho, Louisiana, Nev	vada, New Mexico, Puerto R	nity property state or territor lico, Texas, Washington and V	
Pá	ert 2 Explain th	ne Sources of You	r Income			
4.	Fill in the total an	nount of income yo	nployment or from operating a received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No ■ Yes. Fill in t	he details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	om January 1 of c e date you filed fo		■ Wages, commissions, bonuses, tips	\$25,417.05	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Deptor I	Javid Raymo	ond Many					ase no	affiber (if known)		
			Debtor 1				Г	Debtor 2		
			Sources of i	ncome	Gross	income		Sources of inc	ome	Gross income
			Check all tha			e deductions and		Check all that a		(before deductions and exclusions)
For last cale (January 1 t	endar year: to December :	31, 2016)	■ Wages, co			\$66,426.0		☐ Wages, com oonuses, tips	missions,	
			☐ Operating	a business			[☐ Operating a	business	
	endar year bet to December :		■ Wages, co			\$64,904.0		☐ Wages, com conuses, tips	missions,	
			☐ Operating	a business			[☐ Operating a	business	
winnings List each	s. If you are fili h source and t	ng a joint cas	se and you have	e income that y	you receiv	ed together, list ot include incom	it only	once under De	ebtor 1.	d gambling and lottery
			Debtor 1 Sources of in Describe belo		each s	income from source e deductions and	5	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
	endar year bet to December :		IRA Distrib	ution	excius	\$28,985.0	0			
(
Part 3: Li	ist Certain Pa	yments You	Made Before	You Filed for	Bankrupt	су				
6. Are eith □ No.	. Neither De individual p	ebtor 1 nor Dorimarily for a	personal, fami	rimarily consuly, or househol	umer deb					1(8) as "incurred by an
	□ No.	Go to line 7	•		,	any endance a c	.0.0.	ψο, . <u>_</u> ο οο		
	☐ Yes	paid that cre not include	editor. Do not in payments to ar	nclude paymer n attorney for the	nts for don this bankru	nestic support ol	bligatio	ons, such as ch	ild support a	ne total amount you nd alimony. Also, do
■ Yes			or both have proper you filed for			ts. orany creditor a to	otal of	\$600 or more?		
	□ _{No.}	Go to line 7	·.							
	■ Yes	List below e include pay	each creditor to	estic support o						creditor. Do not nclude payments to an
Credito	or's Name and	l Address	Da	ates of payme	ent	Total amount		Amount you	Was this p	payment for
						paid		still owe		

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 35 of 59

Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payn	nent for			
	Wells Fargo Home Mortgage 8480 Stagecoach Circle Frederick, MD 21701	3/01/2017 4/01/2017 5/01/2017	\$3,537.66	\$205,958.00	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repay ☐ Suppliers or ☐ Other				
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
	No								
	☐ Yes. List all payments to an insider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	s payment			
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No								
	Yes. List all payments to an insider	D-1 (T-1-1-1	A	D (4)	-			
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi Include creditor				
Pa	rt 4: Identify Legal Actions, Repossessio	ns. and Foreclosures							
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of the case				
	Discover Bank	Civil Complaint	Orange County Clerk of		Pending				
	vs David R Many, et al 2016-SC-019701-O		Court 425 N. Orange Ave Room 410 Orlando, FL 32801		☐ On appeal ☐ Concluded				
	Portfolio Recovery Associates, LLC	Civil Complaint	Orange County Court 425 N. Orange		■ Pending □ On appeal				
	vs David Many, et al 2017-SC-003754-O		Room 410 Orlando, FL 32		☐ Concluded				
10.	David Many, et al 2017-SC-003754-O Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		Room 410 Orlando, FL 32	2801		eized, or levied?			
10.	David Many, et al 2017-SC-003754-O Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11.		Room 410 Orlando, FL 32	2801		eized, or levied?			
10.	David Many, et al 2017-SC-003754-O Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		Room 410 Orlando, FL 32 perty repossessed, f	2801		eized, or levied? Value of the property			

Debtor 1 David Raymond Many

Del	btor 1 David Raymond Many	Case number	Case number (if known)					
	accounts or refuse to make a payment be	cause you owed a debt?						
	■ No □ Yes Fill in the details							
	Yes. Fill in the details. Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount				
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?							
	■ No							
	☐ Yes							
Pai	rt 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?							
13.	■ No							
	☐ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No							
	Yes. Fill in the details for each gift or contribution.							
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you contributed	Dates you contributed	Value				
Pai	rt 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling?							
	■ No							
	☐ Yes. Fill in the details.							
	how the loss occurred	Describe any insurance coverage for the loss nclude the amount that insurance has paid. List pending	Date of your loss	Value of property lost				
		nsurance claims on line 33 of Schedule A/B: Property.						
Pai	rt 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid	Description and value of any property	Date payment	Amount of				
	Address Email or website address Person Who Made the Payment, if Not Yo	transferred	or transfer was made	payment				
	Walter F. Benenati, Credit Attorney F 2702 E Robinson Street		05/18/2017	\$1,275.00				
	Orlando, FL 32803 wfb@777lawfirm.com							

Debtor 1	David	Ray	mond	Many
	David	Ray	mona	IVIAII

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you I No Yes. Fill in the details.	or to make payments			or transfer any proper	ty to anyone who
	Person Who Was Paid Address	Description and va	alue of any prop	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affalle as security (such as the	irs? ne granting of a s			
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			any property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.		/ property to a s	elf-settled tru	ust or similar device c	of which you are a
	Name of trust	Description and va	alue of the prope	erty transferr	red	Date Transfer was made
Par 20.	8: List of Certain Financial Accounts, Instruction Within 1 year before you filed for bankruptcy,	,	•	•	your name or for yo	ur hanafit closed
20.	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa No Yes, Fill in the details.	other financial accoun	ts; certificates o	of deposit; sh		
		ast 4 digits of account number	Type of accour instrument	clo mo	ite account was osed, sold, oved, or insferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed for	bankruptcy, any	/ safe deposi	t box or other deposit	tory for securities,
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acco		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or No Yes. Fill in the details.	State and ZIP Code) place other than your	home within 1 y	ear before yo	ou filed for bankrupto	y?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?

Debtor 1	David	Raymond	Man.
	David	Raymond	ı ıvıarı\

Case number (if known)

Pa	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pai	t 10: Give Details About Environmental Inform	nation		
For	the purpose of Part 10, the following definitions	s apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, groun	<u> </u>	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	-	law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines as a hazardous	s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of an	y release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site	Governmental unit	Environmental law, if you	Date of notice
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State an ZIP Code)	d know it	
26.	Have you been a party in any judicial or admin	istrative proceeding under any env	ironmental law? Include settlements	and orders.
	■ No			
	Yes. Fill in the details.	Occupation of the control of the con	National of the same	01-1
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	t 11: Give Details About Your Business or Co	nnections to Any Business		
	Within 4 years before you filed for bankruptcy,		ny of the following connections to an	y business?
	☐ A sole proprietor or self-employed in a			,
	☐ A member of a limited liability compan		•	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execu	utive of a corporation		
	An owner of at least 5% of the veting o	u aguity accomition of a comparation		

Official Form 107

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 39 of 59

Deb	otor 1 David Raymond Many	Cas	se number (if known)
	■ No. None of the above applies. Go to P	eart 12.	
	☐ Yes. Check all that apply above and fill	in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	institutions, creditors, or other parties.	cy, did you give a financial statement to ar	nyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	t 12: Sign Below		
are t with 18 U	true and correct. I understand that making a sabankruptcy case can result in fines up to \$1.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, or ol	declare under penalty of perjury that the answers btaining money or property by fraud in connection irs, or both.
Da	David Raymond Many vid Raymond Many nature of Debtor 1	Signature of Debtor 2	
Dat	e _May 19, 2017	Date	
Did: ■ N □ Y		nt of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
Did :	you pay or agree to pay someone who is not lo	an attorney to help you fill out bankruptcy	y forms?
ПΥ	es. Name of Person Attach the Bankrup	otcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).

Fill in this inform	nation to identify your case:
Debtor 1	David Raymond Many
Debtor 2 (Spouse, if filing)	
United States E	Sankruptcy Court for the: Middle District of Florida
Case number (if known)	

Check	as directed in lines 17 and 21:
	ording to the calculations required by this ement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 6,066.99 991.73 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1	David Raymond Many		Case numbe	r (<i>if known</i>)			
			Column A Debtor 1		Column E Debtor 2 non-filing	or	
7. In	terest, dividends, and royalties		\$	0.00	\$	0.00	
	nemployment compensation		\$	0.00	\$	0.00	
	o not enter the amount if you contend that the amount received was a benef e Social Security Act. Instead, list it here:	it under					
	For you\$	00					
	For your spouse \$ 0.	00					
	ension or retirement income. Do not include any amount received that was enefit under the Social Security Act.	s a	\$	0.00	\$	0.00	
De re de	come from all other sources not listed above. Specify the source and and not include any benefits received under the Social Security Act or payment ceived as a victim of a war crime, a crime against humanity, or international of mestic terrorism. If necessary, list other sources on a separate page and putal below.	its or					
	Long Term Disability		\$	0.00	\$	346.67	
			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.	+	\$	0.00	\$	0.00	
	alculate your total average monthly income. Add lines 2 through 10 for ach column. Then add the total for Column A to the total for Column B.	\$	6,066.99	+ \$ _	1,338.40		7,405.39
12. C c	opy your total average monthly income from line 11.					\$	7,405.39
	You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below.						
	You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that was NO dependents, such as payment of the spouse's tax liability or the spouse's						
	Below, specify the basis for excluding this income and the amount of income adjustments on a separate page.	ome de	voted to each	n purpose	e. If necessa	ry, list addi	tional
	If this adjustment does not apply, enter 0 below. Joint Health Insurance from Wife's income	\$	847.3	3			
	Wife's Witholdings, Taxes & Union Dues	» — \$	178.3				
	Wife's Car Payment	\$ \$	312.7				
	Total	\$	1,338.4	0 c	opy here=>	_	1,338.40
						_	
14.	Your current monthly income. Subtract line 13 from line 12.					\$	6,066.99
15. (Calculate your current monthly income for the year. Follow these steps:						
1	5a. Copy line 14 here=>					\$	6,066.99
	Multiply line 15a by 12 (the number of months in a year).					x	12
1	5b. The result is your current monthly income for the year for this part of the	ne form				\$	72,803.88

David Raymond Many

Debtor 1

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 42 of 59

Debt	or 1	David Raymond Many		Case number (if known)		
16	Cal	ulate the median family income that applies to you	Follow these	stens:		
10		Fill in the state in which you live.	FL	, 510-55.		
	iva	I iii iii tile state iii wiitch you live.	- ' -	_		
	16b	Fill in the number of people in your household.	2			
	16c	Fill in the median family income for your state and size			\$	55,344.00
		To find a list of applicable median income amounts, go instructions for this form. This list may also be available				
17	. Hov	do the lines compare?	o at the bank	rapidy didnice difficult		
	17a	☐ Line 15b is less than or equal to line 16c. On the 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT				
	17b	■ Line 15b is more than line 16c. On the top of p 1325(b)(3). Go to Part 3 and fill out Calculat your current monthly income from line 14 above	ion of Your D			
Par	t 3:	Calculate Your Commitment Period Under 11 U.S	.C. § 1325(b)	(4)		
18.	Cop	y your total average monthly income from line 11 .			\$	7,405.39
19.	cont	uct the marital adjustment if it applies. If you are maend that calculating the commitment period under 11 U ise's income, copy the amount from line 13.				
	19a	If the marital adjustment does not apply, fill in 0 on line	19a.		- \$	1,338.40
	19b	Subtract line 19a from line 18.			\$	6,066.99
20.	Cal	ulate your current monthly income for the year. Fo	llow these ste	eps:		
	20a	Copy line 19b			\$_	6,066.99
		Multiply by 12 (the number of months in a year).			x	12
	20b	The result is your current monthly income for the year	for this part o	f the form	\$	72,803.88
	20c	Copy the median family income for your state and size	of household	d from line 16c	\$	55,344.00
	21.	How do the lines compare?				
		Line 20b is less than line 20c. Unless otherwise of period is 3 years. Go to Part 4.	ordered by the	e court, on the top of page 1 of this form, ch	eck box 3, 7	he commitment
		Line 20b is more than or equal to line 20c. Unless commitment period is 5 years. Go to Part 4.	s otherwise o	rdered by the court, on the top of page 1 of	this form, ch	eck box 4, The
Par	t 4:	Sign Below				
	By s	igning here, under penalty of perjury I declare that the	nformation or	n this statement and in any attachments is t	rue and corr	ect.
)	(Isl	David Raymond Many				
•	Da	vid Raymond Many				
	•	nature of Debtor 1				
	Date	May 19, 2017 MM / DD / YYYY				
	If yo	u checked 17a, do NOT fill out or file Form 122C-2.				
	If yo	u checked 17b, fill out Form 122C-2 and file it with this	form. On line	39 of that form, copy your current monthly	income from	line 14 above.

							1					
Fill in	this info	ormation to id	dentify your ca	se:								
Debto	or 1	David Ray	mond Many									
Debto (Spou	or 2 ise, if filing	g)										
United	d States E	Bankruptcy Co	ourt for the: Mic	ddle District of F	Florida							
Case (if kno	number own)							☐ Che	ck if this is	s an ameno	led filir	ng
Officia	ıl Form 1	22C-2										
Cha	pter	13 Calc	ulation o	of Your D)isposa	ble Ir	ncome					04/16
			I need your con Il Form 122C-1)		f Chapter 13	3 Stateme	ent of Your C	urrent Month	ly Income	and Calcula	ition o	f
space	is neede	d, attach a se	te as possible. eparate sheet to r name and cas	o this form, Inc	lude the line							
Part 1	: Ca	Iculate Your	Deductions fro	m Your Income	e							
the	question	ns in lines 6-1	rvice (IRS) issu 15. To find the I available at the	RS standards,	go online us	sing the li						
exp	enses if t	hey are highe	ints set out in lin or than the stand ot any amounts t	ards. Do not inc	lude any ope	rating exp	enses that yo	ou subtracted	from incom			
If yo	our exper	nses differ fror	m month to mont	h, enter the ave	erage expense	e.						
Not	te: Line ni	umbers 1-4 ar	e not used in thi	s form. These n	umbers apply	y to inform	nation require	d by a similar	form used	in chapter 7	cases.	
5.	The nu	mber of peop	ole used in dete	rmining your o	deductions fi	rom inco	me					
	plus the	number of ar	people who could ny additional dep e in your househo	pendents whom						2		
Nat	tional Sta	andards	You must u	se the IRS Natio	onal Standard	ds to answ	ver the question	ons in lines 6-	7.			
6.			other items: Us dollar amount for				I in line 5 and	the IRS Natio	onal	\$	1	,132.00
7.	the doll	ar amount for who are 65 or	h care allowand out-of-pocket he olderbecause amount, you may	ealth care. The rolder people ha	number of peo ave a higher I	ople is spl RS allowa	lit into two cat ance for health	egoriespeop	ole who are	under 65 an	nd	

Official Form 22C-2

Debtor 1	D	Pavid Raymond Many				Case number (if knowr))			
Peop	le w	vho are under 65 years of age									
-	7a.	Out-of-pocket health care allowance per person	\$	49							
7	7b.	Number of people who are under 65	X	2							
7	7c.	Subtotal. Multiply line 7a by line 7b.	\$	98.00		Copy here:	=> \$		98.00		
Peop	le w	vho are 65 years of age or older									
7	7d.	Out-of-pocket health care allowance per person	\$	117							
-	7e.	Number of people who are 65 or older	Χ	0							
7	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here:	=> \$	i	0.00		
ī	7g.	Total. Add line 7c and line 7f)	98.00		Copy tot	al here=>	\$	98.00
banki Ho To arr separ 8. I 9. I	rupt pusi nswe rate Hou n th Hou	n information from the IRS, the U.S. Trustee Proceeding purposes into two parts: ing and utilities - Insurance and operating expensing and utilities - Mortgage or rent expenses er the questions in lines 8-9, use the U.S. Trustee instructions for this form. This chart may also be using and utilities - Insurance and operating expense dollar amount listed for your county for insurance as using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, for listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages as a To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.	e Prograi e availabenses: Us and opera ill in the di s. ind other did all amo	m chart. To ble at the ba sing the num ating expens collar amoun debts secure bunts that are after you file	find th nkrupt ber of pes. t	e chart, go cy clerk's o people you e	online	e using to	he link s	specified	in the 534.00
			pa	yment							
		Wells Fargo Home Mortgage		1,27	8.11	_					
		9b. Total average monthly paymer	t \$_	1,27	8.11	Copy here=>	-\$_	1,	278.11	Repeat t on line 3	his amount 3a.
(9c.	Net mortgage or rent expense.							7		
		Subtract line 9b (total average monthly payment) fror rent expense). If this number is less than \$0, ent		a (mortgage		\$		0.00	Copy here=>	· \$	0.00
10 I	lf yo	ou claim that the U.S. Trustee Program's division	of the IR	S Local Sta	ındard	for housing	is in	correct a	្ ind	\$	0.00

Explain why: __

ebtor 1	David Raymond Many		Case number (if k	nown)		
11.	Local transportation expenses: Check the number of vehic	cles for which you claim a	ın ownership o	or operating	g expense.	
	□ 0. Go to line 14.	•				
	■ 1. Go to line 12.					
	☐ 2 or more. Go to line 12.					
12.	Vehicle operation expense: Using the IRS Local Standards	and the number of vehic	cles for which	vou claim th	ne	
	operating expenses, fill in the Operating Costs that apply for	your Census region or m	etropolitan sta	tistical area	a. \$	415.00
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.	Standards, calculate the or lease payments on the	net ownership vehicle. In a	o or lease e ddition, you	xpense for each ve u may not claim the	hicle below. expense for
Vel	nicle 1 Describe Vehicle 1:					
13a.	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13b.	Average monthly payment for all debts secured by Vehicle 1.					
	Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.					
	Name of each creditor for Vehicle 1	Average monthly payment				
	-NONE-	\$				
	Total Average Monthly Payment	\$0.00	Copy here => -\$	0	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0	, enter \$0	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Vel	nicle 2 Describe Vehicle 2:					
13d.	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	Do not include costs for				
	Name of each creditor for Vehicle 2	Average monthly payment				
		\$				
	Total average monthly payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of v				n the \$	0.00
15.	Additional public transportation expense: If you claimed 1 also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Trans</i>	hat you believe is the app	11 and if you propriate expe	claim that yense, but yo	ou may bu may \$	0.00

Debtor 1

Debtor 1	David Raymond Mar	ny			Case number (if known)		
Oth	er Necessary Expenses	In addition to the expension the following IRS categorian		ns listed above	you are allowed your monthly expe	nses for	
16.	self-employment taxes, soo your pay for these taxes. H and subtract that number fi	cial security taxes, and Me dowever, if you expect to re rom the total monthly amo	dicare taxe eceive a tax	s. You may inc refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld fr ust divide the expected refund by 12 for taxes.	om	1,239.42
17.	Do not include real estate, Involuntary deductions: To contributions, union dues, a	The total monthly payroll d	eductions t	hat your job re	quires, such as retirement	_	
			job, such a	as voluntary 40	1(k) contributions or payroll savings.	\$	16.25
18.	filing together, include payr	ments that you make for your life insurance on your de	our spouse'	s term life insu	e insurance. If two married people ar rance. spouse's life insurance, or for any fo		0.00
19.	Court-ordered payments: administrative agency, suc				by the order of a court or		
	Do not include payments o	n past due obligations for	spousal or	child support. \	You will list these obligations in line 3	35. \$	0.00
20.	Education: The total mont	, , ,	or education	n that is either i	required:		
	as a condition for your j					•	0.00
	for your physically or me	entally challenged depend	ent child if	no public educ	ation is available for similar services	. \$	0.00
21.	Childcare: The total month Do not include payments for			•	itting, daycare, nursery, and presch	ool. \$	0.00
22.	that is required for the heal by a health savings accour	Ith and welfare of you or you. It. Include only the amount	our depend t that is mo	ents and that is re than the tota		d	32.00
	Payments for health insura	_				\$	32.00
23.	for you and your dependent phone service, to the exter- income, if it is not reimburs Do not include payments for	nts, such as pagers, call want necessary for your health ed by your employer. or basic home telephone, i	aiting, called h and welfa nternet and	r identification, are or that of your	you pay for telecommunication service special long distance, or business cour dependents or for the production rvice. Do not include self-employment ount you previously deducted.	ell of	100.00
24.	Add all of the expenses a Add lines 6 through 23.	allowed under the IRS ex	pense allo	wances.		\$	3,566.67
Add	itional Expense Deduction	These are additiona Note: Do not include					
25.					ses. The monthly expenses for heal ly necessary for yourself, your spous		
	Health insurance		\$	0.00			
	Disability insurance		\$	64.36			
	Health savings account		+\$	0.00			
	Total		\$	64.36	Copy total here=>	\$	64.36
	Do you actually spend this No. How much do y	total amount? you actually spend?			_		
	Yes		\$				
26.	continue to pay for the reas	sonable and necessary car r of your immediate family	re and supp who is unal	oort of an elder ble to pay for s	e actual monthly expenses that you wally, chronically ill, or disabled membe uch expenses. These expenses may 29A(b)	r of	0.00
27.					nses that you incur to maintain the es Act or other federal laws that app	ly.	
	By law, the court must keep	•				\$	0.00

ebtor 1	David Raymond Many	Case number (if known)			
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance and operating exp	enses or	1	
	If you believe that you have home energy c 8, then fill in the excess amount of home er	osts that are more than the home energy costs included in expenergy costs	ses on l	ne	
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must show that the additionary.	onal	\$	0.00
	Education expenses for dependent child \$160.42* per child) that you pay for your de public elementary or secondary school.	Iren who are younger than 18. The monthly expenses (not more pendent children who are younger than 18 years old to attend a	e than orivate o	r	
	You must give your case trustee documental claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the amount already accounted for in lines 6-23.	ount		
	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or after the date of adjus	tment.	\$	0.00
		he monthly amount by which your actual food and clothing expen g allowances in the IRS National Standards. That amount cannot s in the IRS National Standards.			
		ional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.			
	You must show that the additional amount of	claimed is reasonable and necessary.		\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	e amount that you will continue to contribute in the form of cash or inization. 11 U.S.C. § 548(d)(3) and (4).	financia	ıl	
	Do not include any amount more than 15%	of your gross monthly income.		\$	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	tions.		\$_	64.36
Dedu	ictions for Debt Payment				
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home mortgages, vehicle 33a through 33e.	•		
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.			
	Mortgages on your home			Aver	age monthly
33a.	Copy line 9b here		=>	\$	1,278.11
	Loans on your first two vehicles				
33b.	Once Para 40h hann		=>	\$	0.00
33c.			=>	\$	0.00
33d.	List other secured debts:				
	e of each creditor for other secured debt	Identify property that secures the debt Does p include or insur	taxes		
		□ No)		
	-NONE-	\(\sqrt{\text{Y}} \)	es	\$	
		□ No)		
		□ Ye	es	\$	
		<u>_</u>			
		\ \textsquare \ \textsquare \ \ \textsquare \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	es +	\$	
33e	Total average monthly payment. Add lines	\$ 33a through 33d \$ 1,278.1	Co tot hei		1,278.11

Debtor 1	Davi	id Raymond Many			Case	e num	ber (if known)			
		debts that you listed in line property necessary for you				,				
	No.	Go to line 35.								
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill ir	ssession of your prope	erty (called the c						
Nam	e of the	creditor	Identify property that	secures the deb	t	Tota	al cure amount		Monthl	
-NC	NE-				\$			÷ 60 =		•
								Cop		
					Total	\$_	0.00	_ tota _ her	e=> \$_	0.00
35 D	יט אטוו ני	owe any priority claims - sı	ich as a priority tax	child sunnort	ا or alimony - th	at				
		due as of the filing date of				aı				
	No.	Go to line 36.								
	Yes.	Fill in the total amount of al ongoing priority claims, suc	I of these priority claim the as those you listed in	s. Do not includ n line 19.	e current or					
		Total amount of all past-d	ue priority claims			\$	0.00	_ ÷ (60 \$_	0.00
36. P	rojecte	d monthly Chapter 13 plan	payment			\$_	1,405.92	_		
O th To	office of the Exectorise in the Exectorise of the Execution of the Executi	nultiplier for your district as s the United States Courts (fo utive Office for United States ist of district multipliers that inclu nstructions for this form. This list	r districts in Alabama as Trustees (for all other des your district, go online	and North Caroli r districts). e using the link sp	na) or by ecified in the	× _	10.00	-		
A	verage	monthly administrative expe	nse			\$	140.59	Copy here=		140.59
		of the deductions for debtes 33e through 36.	payment.						\$_	1,418.70
Total	Deduc	tions from Income								
38. A	dd all d	of the allowed deductions.								
		ne 24, All of the expenses all e allowances	lowed under IRS	\$	3,566.67	_				
(Copy lin	ne 32, All of the additional ex			64.36	_				
(Copy lin	ne 37, All of the deductions f	or debt payment		1,418.70					

Debtor 1	David Raymo	ond Many		Case	e numl	ber (if known)		
Part 2:	Determine Yo	our Disposable Income Under 11	U.S.C. § 1325	(b)(2)				
		rrent monthly income from line Current Monthly Income and Ca					\$	6,066.99
chi disa rec	Idren. The mont ability payments eived in accorda	bly necessary income you receithly average of any child support part of a dependent child, reported in nee with applicable nonbankruptcy bended for such child.	ayments, foster Part I of Form 1	care payments, or 22C-1, that you	\$	0.	00	
em in 1	ployer withheld f	retirement deductions. The monitor rom wages as contributions for quality (7) plus all required repayments (C. § 362(b)(19).	alified retiremer	nt plans, as specified	\$	0.	00	
42. Tot	al of all deducti	ions allowed under 11 U.S.C. § 7	07(b)(2)(A). Co	py line 38 here=>	\$	5,049.	73	
exp the	enses and you hir expenses. You	cial circumstances. If special circ nave no reasonable alternative, de a must give your case trustee a det documentation for the expenses.	scribe the spec	ial circumstances and	d			
Descri	be the special o	circumstances		Amount of exper	nse			
				\$				
				\$				
				\$				
			Total \$	0.00	Co her	py re=> \$	0.00	
44. To t	tal adjustments	. Add lines 40 through 43.		=> \$	i	5,049.73	Copy here=> -\$	5,049.73
45. Ca l	·	nthly disposable income under	§ 1325(b)(2). S	ubtract line 44 from lir	ne 39	9.	\$	1,017.26
hav tim you	ange in income ve changed or ar e your case will b I filed your petition	or expenses. If the income in For e virtually certain to change after the open, fill in the information below, check 122C-1 in the first colum II in when the increase occurred, a	ne date you file w. For example n, enter line 2 ir	d your bankruptcy pet , if the wages reported n the second column,	tition d inc	and during the reased after		
Form	Line	Reason for change		Date of change		Increase or decrease?	Amount of o	hange
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	D-2 D-1 D-2 D-1 D-2					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease ☐ Increase ☐ Increase	\$ \$ \$	
1 220	D-2					☐ Decrease	\$	

Case 6:17-bk-03317-ABB Doc 1 Filed 05/19/17 Page 50 of 59

Debtor 1	David Raymond Many	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you	declare that the information on this statement and in any attachments is true and correct.
	/ / D	
	/s/ David Raymond Many	
	David Raymond Many	
	Signature of Debtor 1	
Date	May 19, 2017	
	MM / DD / YYYY	
	MIMI / DD / TTTT	
	MIM / DD / TTTT	

Debtor 1 David Raymond Many Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2016 to 04/30/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Action Nissan, Inc

Income by Month:

6 Months Ago:	11/2016	\$5,628.89
5 Months Ago:	12/2016	\$6,498.51
4 Months Ago:	01/2017	\$5,836.63
3 Months Ago:	02/2017	\$5,550.51
2 Months Ago:	03/2017	\$6,763.77
Last Month:	04/2017	\$6,123.64
	Average per month:	\$6,066.99

Debtor 1 David Raymond Many

Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 11/01/2016 to 04/30/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Disney Worldwide Services

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: **\$5,945.33** from check dated **10/31/2016** . Ending Year-to-Date Income: **\$5,948.50** from check dated **12/31/2016** .

This Year:

Current Year-to-Date Income: \$5,947.18 from check dated 4/30/2017.

Income for six-month period (Current+(Ending-Starting)): \$5,950.35 .

Average Monthly Income: \$991.73.

Line 10 - Income from all other sources

Source of Income: Long Term Disability

Income by Month:

6 Months Ago:	11/2016	\$1,040.00
5 Months Ago:	12/2016	\$1,040.00
4 Months Ago:	01/2017	\$0.00
3 Months Ago:	02/2017	\$0.00
2 Months Ago:	03/2017	\$0.00
Last Month:	04/2017	\$0.00
	Average per month:	\$346.67

Official Form 122C-2

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

In re	David Raymond Many		Case No.		
		Debtor(s)	Chapter	13	
Γhe ab		TICATION OF CREDITOR N		of his/her knowledge.	
Date:	May 19, 2017	/s/ David Raymond Many			
	-	David Raymond Many			
		Signature of Debtor			

David Raymond Many 14901 White Magnolia Court Orlando, FL 32824

Portfolio Recovery PO Box 41067 Norfolk, VA 23541

Walter F. Benenati Walter F. Benenati, Credit Attorney P.A. 4315 Pickett Road 2702 E Robinson Street Orlando, FL 32803

SST/CIGPFICORP Saint Joseph, MO 64503

Afni PO Box 3427 Bloomington, IL 61702 SST/Columbus Bank & Trust Attn: Bankruptcy Dept PO Box 3997 St Joseph, MO 64503

Capital One Attn: Bankruptcy PO Box 30253 Salt Lake City, UT 84130 Wells Fargo Home Mortgage 8480 Stagecoach Circle Frederick, MD 21701

Cardworks/CW Nexus Attn: Bankruptcy PO Box 9201 Old Bethpage, NY 11804

Citicards Cbna Attn: Centralized Bankruptcy PO Box 790040 Saint Louis, MO 63179

Discover Financial PO Box 3025 New Albany, OH 43054

Kohls/Capital One Kohls Credit PO Box 3043 Milwaukee, WI 53201

LVNV Funding PO Box 10497 Greenville, SC 29603 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

In re	David Raymond Many		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSA	ATION OF ATTO	RNEY FOR DE	EBTOR(S)
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), lompensation paid to me within one year before the filing of e rendered on behalf of the debtor(s) in contemplation of or	the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,275.00
	Prior to the filing of this statement I have received		\$	1,275.00
	Balance Due			0.00
2. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. I	I have not agreed to share the above-disclosed compensa	ation with any other person	n unless they are mem	bers and associates of my law firm.
5. I a	I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names on return for the above-disclosed fee, I have agreed to render. Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statement.	of the people sharing in the legal service for all aspectadvice to the debtor in de	e compensation is atta ets of the bankruptcy c etermining whether to	ched.
c	Representation of the debtor at the meeting of creditors at [Other provisions as needed] Negotiations with secured creditors to redureaffirmation agreements and applications at 522(f)(2)(A) for avoidance of liens on house *\$50.00 Monitoring Fee applicable for durations at the meeting of creditors at the meet	nd confirmation hearing, and confirmation hearing, and ce to market value; exast needed; preparation hold goods.	and any adjourned hea semption planning; n and filing of moti	preparation and filing of ons pursuant to 11 USC
б. В	y agreement with the debtor(s), the above-disclosed fee doe Representation of the debtors in any discha any other adversary proceeding.	es not include the followin	ng service:	
	C	ERTIFICATION		
	certify that the foregoing is a complete statement of any agrankruptcy proceeding.	reement or arrangement for	or payment to me for re	epresentation of the debtor(s) in
Ma	ay 19, 2017	/s/ Walter F. Ben	enati	
Do	-	Walter F. Benena Signature of Attorn Walter F. Benena 2702 E Robinson Orlando, FL 328	ati 46679 ati, Credit Attorney n Street 03 Fax: (407) 236-7667	